

PC4459(1) CHESTERFIELD

BOROUGH OF CHESTERFIELD



ANNUAL REPORT

OF THE

School Medical Officer

For the Year, 1937.

J. A. STIRLING, D.S.C., M.B., D.P.H.,
SCHOOL MEDICAL OFFICER.



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BOROUGH OF CHESTERFIELD.

Education Committee, 1937-38.

THE MAYOR (ALDERMAN H. HATTON, C.C.)

Chairman :

ALDERMAN H. CROPPER, J.P.

Vice-Chairman :

COUNCILLOR ROBINSON, J.P.

Members :

ALDERMAN ROBINSON, J.P.

ALDERMAN WICKS, J.P.

COUNCILLOR BIRD.

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COUNCILLOR CORNER.

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Staff of the School Medical Service.

School Medical Officer and Medical Officer of Health :

J. A. STIRLING, D.S.C., M.B., Ch.B., D.P.H.

*Assistant School Medical Officer and Assistant Medical Officer
of Health :*

BELL C. MACKAY, M.B., Ch.B., D.P.H.

Ophthalmic Surgeon :

WM. M. MUIRHEAD, M.B., Ch.B., D.O.M.S., R.C.P.S.

School Dental Officer :

A. ROYDEN LITTLAR, L.D.S.

School Nurses and Health Visitors :

MRS. E. A. JOHNSON.

MRS. P. A. ELLOR.

MISS O. M. PARKER.

MISS E. E. PASSEY.

MISS F. SMITH.

MISS C. H. MOORE.

MISS R. HANCOCK.

Clerical Staff :

G. S. BROWN.

MISS E. M. ELLIOTT.

MISS N. GILL.

MISS E. REYNOLDS.

MISS A. PIKE.



Borough of Chesterfield.

School Medical Officer's Report for 1937.

*To the Chairman and Members of the Education Committee
of the Borough of Chesterfield.*

Mr. Chairman, Ladies and Gentlemen,

I have the honour, as School Medical Officer, to submit my Ninth Annual Report on the Medical Inspection and Treatment of School Children in the Borough during the year ended December 31st, 1937.

The Report has been prepared in accordance with the requirements of the Board of Education.

No change has taken place in the Scheme of Medical Inspection, and the only change in staff has been the appointment of Miss R. Hancock, who has been appointed a School Nurse and Health Visitor in place of Mrs. S. M. Street, who has been appointed Supervisor of Midwives.

I have pleasure in reporting that the work has been carried out with smoothness, and I wish to take this opportunity of expressing my thanks to Dr. Mackay, Dr. Stead and his Staff, and the Head Teachers of the various Schools, the Clerical Staff at the School Clinic, and to the School Nurses for the assistance they have freely given at all times, and to you, Ladies and Gentlemen, for your continued support which I have greatly appreciated.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

J. A. STIRLING,

School Medical Officer.

CO-ORDINATION.

The closest co-ordination exists between all the health services of the Borough, the Medical Officer of Health being also the School Medical Officer, while the Health Visitors also act as School Nurses.

The care of debilitated children under school age is undertaken by the Maternity and Child Welfare Committee.

SCHOOL HYGIENE.

As indicated in previous reports, the building of several new schools and the reconstruction of others has taken place during recent years. These buildings are all of excellent design, and are in accord with modern ideas for securing the maximum of light and fresh air, and are undoubtedly having a very beneficial effect on the general health of the children.

MEDICAL INSPECTION.

Every child is examined at least three times during its school career, as an "Entrant," as an "Intermediate" when eight years of age, and as a "Leaver" at the age of twelve.

"Exceptional Cases," that is to say children suffering from various conditions such as Heart Disease, Epilepsy, Crippling, etc., sufficiently severe to interfere with an ordinary mode of life are examined at least once a year.

In addition to this, any child who is ailing or who has recovered from some condition which is likely to recur is examined at regular intervals during its school life.

FINDINGS OF MEDICAL INSPECTION.

The defects discovered during the School Medical Inspections will be found summarised in Table 2 at the end of this report. In previous years figures have only been included under this heading relating to children examined at Routine Medical Inspections, but in order to meet the requirements of the Board of Education and to allow of uniformity for comparison purposes, this table now includes defects found in all children examined during the year whether at school Inspections or at the clinics held by the School Medical Officer at the School Clinic.

UNCLEANLINESS.

In addition to the routine medical inspections, periodical examinations for cleanliness are made by the School Nurses during the year. During the period under review 34,115 children were examined in the schools and of this number 561 were found unclean, a decrease of children found unclean of 265 on last year's figures.

In cases where uncleanness exists notice is sent to the parent calling attention to this fact and giving instructions for cleansing. If at a subsequent re-examination the condition is found to persist, a more strongly worded notice is sent, but it is found that in the majority of cases the condition is remedied after receipt of the first notice. In bad cases the child is immediately excluded from school, the home is visited, the necessary instructions given and the child told to report to the Clinic within 48 hours. All children thus excluded are inspected at the Clinic before being allowed to return to school, and in every case during the period under review a sufficient improvement has been effected without resort to prosecution, although the kindly assistance of the inspector of the N.S.P.C.C. has been invoked on occasions, with good effect.

INFECTIOUS DISEASE.

The arrangements under this heading remain as in previous years, and have again worked very satisfactorily during the period under review.

During the year the number of cases of Scarlet Fever has been considerably less than last year, but unfortunately the number of cases of Diphtheria has increased. Energetic measures have been taken continuously during the year in this connection and it has not been found necessary to close any schools.

It is to be noted that the type of Diphtheria seems to be certainly tending to become more severe and I would strongly urge all parents to have their children between the ages of 1—12 immunised. It is pleasing to note that more parents are realising the necessity for having this done as is evident by the fact that 1,500 children of school age and 100 children under school age were immunised during the year under review.

A summary of the incidence of infectious disease is given below :—

	1937	1936
Scarlet Fever	56	106
Diphtheria	166	138
Pneumonia	27	28
Enteric Fever	1	2
Dysentery	—	1
Cerebro-spinal Meningitis	1	—
Erysipelas	1	—
	<hr/> 252 <hr/>	<hr/> 275 <hr/>

FOLLOWING UP.

Medical Inspection is obviously of little use unless an efficient scheme of "following up" is in operation, that is, satisfactory arrangements made for the school and subsequent home visiting of cases, found at either routine or special examinations in school, to be suffering from some disease or defect. Such arrangements which were made in the Borough in 1931 continue to prove very satisfactory and effective.

The work of the School Nurses during the year is shown in the following analysis :—

(1) Visits to Schools	.....	1866
(a) For Infectious Diseases	.....	86
(b) Other Visits	.....	1616
(c) For Verminous Surveys	.....	164
(2) Visits to Homes of School Children	.....	1385

Reason of Visit.	No. of Visit.
Verminous Children	41
Scabies	5
Ringworm	2
Eye Diseases and Eye Defects	163
Enlarged Tonsils and Adenoids	101
Other Medical Defects	466
Infectious Disease	415
Other Visits and Re-visits	192

MEDICAL TREATMENT.

That the Minor Ailments Clinics still continue their sphere of usefulness is evidenced by the fact that 2,162 children made 9,970 attendances at the clinics during the year.

The following table shows the complaints for which the children were treated, and contains the figures for both the Saltergate and Old Whittington Clinics :—

Skin Diseases :—

Scabies	.....	34
Impetigo	.....	178
Ringworm (Scalp)	.....	17
Ringworm (Body)	.....	15
Other Skin Diseases	.....	92

Eye Diseases :—

Blepharitis	.....	57
Conjunctivitis	.....	25
Corneal Ulcer	.....	4
Other Eye Diseases	.....	91

Ear Diseases :—		
Otorrhoea	.....	98
Wax	.....	35
Other Ear Diseases	.....	60
Diseases of the Nose and Throat :—		
Enlarged Tonsils and Adenoids	.....	54
Other Conditions	.....	297
Verminous Heads and Bodies	.....	36
Septic Sores and Abrasions	.....	974
General Examinations	.....	263
Dental Diseases	.....	31
All other Diseases	.....	540

TONSILS AND ADENOIDS.

The scheme which came into force with the Royal Hospital towards the end of 1933 has worked smoothly and satisfactorily during the year under review.

Action taken during 1937 in dealing with cases of enlarged tonsils and adenoids will be found in Table IV. Group 3, at the end of this Report.

TUBERCULOSIS.

I wish to express my grateful thanks to Dr. Robertson for his continued and valuable help and co-operation during the year.

It is gratifying to again note the continued small incidence of Tuberculosis, and especially Pulmonary Tuberculosis, in the Borough school children, and this continued low incidence is undoubtedly due to a great extent to the improved hygienic conditions under which the children are working in the new and reconstructed schools.

No cases of Tuberculosis were discovered at routine medical inspection, but during the year six cases of Non-Pulmonary Tuberculosis in children of school age were notified in the Borough.

SKIN DISEASES.

The majority of the cases of Skin Diseases occurring amongst the school population are treated at the School Clinics and fuller particulars under this heading will be found in Table 4, Group I., at the end of the report.

VERMINOUS AND DIRTY CHILDREN.

No proceedings were taken during the year under either the Education Act, 1921, or under the School Attendance Byelaws.

EXTERNAL EYE DISEASES.

Under this heading 177 children were treated at the minor ailments Clinics, this number being mainly made up of children suffering from Blepharitis or Conjunctivitis.

VISION.

I am indebted to Dr. Muirhead, the School Oculist, for the following comments on his work at the Ophthalmic Clinic during the current year :—

School children requiring an eye examination are referred to the School Eye Clinic, where they are examined. Urgent cases reporting to the School Clinic on a day on which the Eye Clinic is not sitting are referred to the Ophthalmic Department of the Chesterfield Royal Hospital. Therefore, a more or less continuous eye service is provided throughout the week, both during the School term and the holidays.

Glasses, or local treatment, or both are prescribed at the Eye Clinic when necessary, and children requiring special local treatment or operation are referred to the Hospital for Out-Patient or In-Patient treatment.

The number of inflammatory cases is still comparatively small ; rarely are they severe, and generally improve quickly with treatment. Credit must be given to the vigilance of the teaching staff, who insist on children with inflamed eyes reporting at the Clinic without delay.

The attention given to the eyes appears to be appreciated by the majority of the parents, and they are willing to co-operate as far as possible.

In some cases the explaining of the eye defects in a simple way to the parents, and even to some of the children is very helpful.

It is gratifying that the parents accompany the children as they do.

The School Teachers render considerable assistance, which is much appreciated, in helping to detect cases of defective vision, and also in the supervision of the children in the wearing of the spectacles.

All cases of squint, at whatever age, should be referred to an Ophthalmic Surgeon without delay. Parents are encouraged to bring their children when they suspect squint, even if they have not attained school age.

Other members of the family, accompanying a child with a squint to the Clinic, are examined at the same time, in order to see if they squint, or are likely to do so, or require glasses. So often it is too late to commence treatment of a squint after the child has commenced its school career.

The Child Welfare Clinic is very helpful in referring suspected cases. The earlier treatment is commenced, the better the progress. One hopes by such methods to reduce considerably the number of squint operations, and also to avoid the long drawn out conservative methods of the treatment of squint.

I am looking forward to setting up a Squint Training Department in Chesterfield in the near future.

I am pleased that the opening of a special Defective Vision Class is anticipated shortly. Such a Class should prove of great value, though it is a pleasing fact that comparatively few children require this special tuition.

The following is a summary of the year's work at the Ophthalmic Clinic :—

Number of attendances	2241
Number of new cases who attended and were tested under atropine	178
Number of new cases who attended and were tested without atropine	41
Number of prescriptions given for glasses	124
Number who obtained glasses	112
Number who required no glasses	81
Number found wearing correct glasses	1
Number of cases referred to Hospital	13
Number of cases in which treatment was not completed	19
Number of cases who have left town and school	3
Number of old cases who attended and were re-examined under atropine	229
Number of old cases who attended and were re-examined without atropine	477
Number of old cases in which new glasses were ordered after re-testing	205
Number of old cases who obtained glasses ordered	183
Number of cases for whom glasses were prescribed in 1936 and did not obtain them until 1937	26
Number of cases in which prescriptions were repeated in respect of broken glasses	11

Number of necessitous cases for whom glasses were obtained by the Local Authority :—

Free	.....	—
Part Payment	.....	89
Full Payment	.....	242

Number of cases referred to Dr. Muirhead from the Minor Ailments Clinics during the year 37

The following gives an analysis of the cases treated :—

Hypermetropia	.....	130
Hypermetropic Astigmatism	.....	383
Myopia	.....	80
High Myopia	.....	10
Myopic Astigmatism	.....	53
Mixed Astigmatism	.....	27
Concomitant Strabismus	.....	85
Divergent Strabismus	.....	4
Nebulae	.....	9
Nystagmus	.....	2
Conjunctivitis	.....	28
Phlyctenular Conjunctivitis	.....	17
Blepharitis	.....	17
Corneal Ulcer	.....	3
Styes, Abscess, etc.	.....	8
Emmetropia	.....	15
Asthenopia	.....	3
Anisometropia	.....	52
Epicanthus	.....	1
Epiphora	.....	2
Spasm of Accommodation	.....	2
Ptoxis	.....	2
Medical	.....	2
Coloboma	.....	3
Sub-conjunctival Haemorrhage	.....	2
Choroiditis	.....	1
Keratitis	.....	1
Cataract	.....	1
Foreign Body	.....	1
Septic Meibomean Cyst	.....	2
Naevus Conjunctiva	.....	1
Dislocated Lenses	.....	1
Microphthalmos	.....	1
Mirror Writing	.....	1

950

DENTAL DEFECTS.

6,954 children were examined by the School Dental Officer during the year ended December 31st, 1937, and of this number

3,397 were found to require treatment, and 2,634 children were actually treated.

Mr. Littlar, the School Dental Officer, gives the following report on the School Dental Inspections and Treatment :—

The Dental work undertaken this year has been of a similar nature to that of previous years, namely, fillings and extractions. The percentage of acceptances for treatment continues very satisfactorily, averaging the same as last year, namely 75%. I still find it impossible to examine and give the necessary treatment to every child in the Borough in the period of twelve months. One very striking feature I have noticed during the last few years is the decreasing incidence of Stomatitis amongst the school children. When the Clinic was first opened it was very common, but every year there has been a diminishing number of cases, and last year I did not have a single case brought to my notice. I think that this might be attributed to better hygienic surroundings both at School and at home and more attention to cleanliness generally, as I think the element of dirt is a great factor in the cause of spread of this disease, especially when the child is in a run down condition.

Through the kind assistance of Mr. Wills, the Inspector of the National Society for the Prevention of Cruelty to Children, a number of children suffering unnecessary pain through the persistent refusal of their parents to allow them to be treated, received treatment.

I wish to thank the teaching staffs for the work they have done in teaching the children Dental Hygiene, for it is little use creating sound teeth if no effort is made to keep them so, also for urging the parents and children to take advantage of the treatment provided at the Clinic.

The Maternity and Child Welfare Clinic which is held on Saturday mornings for children of pre-school age is steadily expanding, which shows that the mothers appreciate the useful work carried out during this Clinic as it ensures dental fitness before the child commences school and so gives it a better chance of resisting disease.

CRIPPLING DEFECTS AND ORTHOPÆDICS.

There has been no alteration in the arrangements under this heading during the current year, and may I again express my grateful thanks to the Staff of the Royal Hospital for their continued valuable help and co-operation.

OPEN-AIR EDUCATION.

This year Stone Hay Camp was again not available but the Chesterfield Branch of the Toc H very kindly placed at our disposal their Camp at Clod Hall and also the services of their excellent resident Commandant. As a result four parties from Hasland Hall, "Gilbert Heathcote," "Mary Swanwick" Senior, and "William Rhodes" Junior Schools were sent for a fortnight during term time. Each party consisted of twenty boys and one teacher. The arrangements made were extremely good and the thanks of the Committee are due in no small measure to the Toc H Authorities for their kindness.

Other organised Camps and School Journeys were as follows :

- (a) Central Girls' School to London during May.
- (b) Hipper Street Junior School to Lyne Regis during June.
- (c) Old Road Senior School to Cromer during June.
- (d) "William Rhodes" Boys' School to Llanfairfechan during June.
- (e) "Violet Markham" Girls' School to the Wye Valley during June.
- (f) Central Boys' School to Folkestone during June.
- (g) "Peter Webster" School to Llanfairfechan during June.
- (h) New Whittington Senior Boys' School to South Wales during July.
- (i) Derby Road Girls' School to Cloughton during July
- (j) Highfield Hall School to Middlesborough to see the ship that they have "adopted," also during July.
- (k) Tapton House School to Speeton during August.
- (l) New Whittington Senior Girls' School, the Derby Road Special Class and the Settlement Class to the Darley Dale Hut during June and July.

The Youth Hostels were again favoured as Holiday Centres, particularly Hartington Hall. Hasland Junior, New Whittington Junior and the Newbold C. of E. Schools each visited Hartington Hall during June and July, and the Derby Road Junior School spent a week at Overton Hall.

SWIMMING AND SCHOOL BATHS.

The reconstruction of the Bath last year added greatly to the facilities for swimming at the Central School Swimming Bath, and many children were quick to take advantage of the new amenities.

The whole of the available time at the Bath is now reserved for school children. As a result a very keen interest in swimming among the children has been manifested especially as it has now been found possible to give a greater proportion of time to the Junior Schools. During the year a total of 13,224 children have visited the Bath during School hours and 5,992 have availed themselves of the opportunity of visiting the Bath with a twopenny ticket outside School hours, this represents an increase of over 1,400 on last year's figures.

The usual facilities have been granted to the Junior Instruction Centre and the Grammar School. 378 children have attended from the Grammar School and 491 from the Junior Instruction Centre.

The usual School and Inter-School Sports were conducted and Mr. Haywood's life-saving class again achieved excellent results.

PHYSICAL TRAINING.

Conditions under this heading remain as in previous years. I am indebted to the Secretary of the Schools Athletic Association, who has kindly furnished the following report of its activities during the current year.

The year 1937 has been most successful and its success is due in no small part to the wholehearted help and support of the majority of the teachers in Chesterfield.

ATHLETIC SPORTS.

The tenth Annual Athletic Sports were held in the Queen's Park on June 9th, and for once in a way the weather proved ideal.

A high standard of performance was maintained, four new records being set up and three being equalled.

A new departure was the re-allocation of certain Trophies. Schools winning the Relay Races were awarded the trophies which had previously been for Individual Championships. The winners of the Trophies included several schools which had not previously figured among the Honours Lists. Old Road Modern School carried off the Senior Boys' School Championship, while Hasland Hall Modern School won the Senior Girls' School Championship. Hasland Junior School shared the Junior Boys' School Trophy with Old Road Junior School, which won the other three Trophies open to Junior Boys and Girls.

COUNTY CHAMPIONSHIPS.

The Association's Teams competed in the County Championships held at Derby, on June 29th, and in the Intermediate and Junior Groups our competitors did very well, the boys winning two firsts and two seconds, while the girls won three firsts and a second.

NATIONAL CHAMPIONSHIPS.

The National Championships were held at Brighton, on July 17th, and the Derbyshire Team included three members from Chesterfield. The National Championships are to be held at Derby in 1938, and it is to be hoped that Chesterfield will be well represented at this gathering.

SWIMMING CHAMPIONSHIPS.

The Annual Swimming Gala was held on September 24th, in the Central School Baths, and it is pleasing to note that the entries were larger than ever before.

The gala was once again a highly successful venture, a high standard of performance being attained by many competitors, five new records being set up. The Girls' Trophies were won by the Old Road and Central Modern Schools, while the Central Modern School won the Boys' Team Race, and the "Peter Webster" Modern School won the Schools' Championship Trophy for the first time.

NETBALL SECTION.

The Annual Inter-School Competition for the year was completed successfully ; six schools competing and the "Violet Markham" School was successful in winning the Shield. After a knock-out tournament Tapton House School Team was selected to represent the Association in the County Final and in this event were beaten by the Derby Association.

CRICKET SECTION.

The season 1937 was memorable for the number of close finishes, and as a consequence there has been a great degree of keenness among the boys. Old Road won the League Championship while the Thompson Cup was won by Tapton House.

PROVISION OF MEALS.

During the year 79,934 milk meals were provided to School children. Of these 75,131 were provided free whilst 4,803 were provided at no cost to the Education Committee. In the cases for free milk the children are inspected by the School Medical Officer, or a member of his staff, and then the case is subjected to a scale, approved by the Board of Education, taking into consideration the size of the family, the family income, and various overhead expenses. The cost to the Committee during the past year was £157.

Apart from the Committee's scheme a voluntary scheme is conducted by the Head Teacher of each School for those children who are not under-nourished or necessitous, but who wish to have their third of a pint of milk daily. Under this scheme 2,869 children have their daily ration which they pay for at the rate of a halfpenny for a third of a pint.

CO-OPERATION OF PARENTS.

During the year a fair number of parents availed themselves of the opportunity of attending the routine medical examinations at the schools. The greater proportion of this number is comprised of the parents of children attending infant departments, the percentage of parents attending the examinations of children in the older age groups being small.

CO-OPERATION OF TEACHERS AND SCHOOL ATTENDANCE OFFICERS.

Reference has been made in previous reports to the whole-hearted assistance afforded by Teachers and Attendance Officers to the School Medical Staff of the Borough, without which the value of medical work in the schools would be seriously impaired.

CO-OPERATION OF VOLUNTARY BODIES.

The Borough Welfare Committee continued and extended its valuable assistance in dealing with crippled and ailing school children, and I would once again like to extend my grateful thanks to Miss Jones and her Staff for continued hearty co-operation.

Acknowledgment must also be made of the effective assistance rendered by the National Society for the Prevention of Cruelty to Children through its local Inspector, Mr. Wills, in procuring amelioration of conditions of ill-treatment or neglect which have adversely affected the health of the children.

BLIND, DEAF AND DUMB, DEFECTIVE AND EPILEPTIC CHILDREN.

At the end of 1937 there were 7 children receiving care in special residential schools, and in addition to this number there were 99 mentally defective children receiving training in special classes attached to four of the elementary schools in the Borough.

NURSERY SCHOOLS.

There are no Nursery Schools in the Borough, but Nursery Classes have been successfully carried on at the following schools :— Highfield Hall, Whittington Moor Infants', Brampton Infants', Hipper Street Infants,' and Edmund Street Infants.'

SECONDARY SCHOOLS.

The arrangements under this heading remain as before.

EMPLOYMENT OF CHILDREN AND YOUNG PERSONS.

126 employment cards were issued during the year.

SCHOOL CLINICS.

The following is the programme of Clinics which has been in force during the period under review :—

	<i>Saltergate Clinic.</i>	<i>Clinic at "Mary Swanwick" School.</i>
(1) Minor Ailments Clinic	Daily, 9-30—12-0 (noon).	Daily, 2-30—4-0 p.m.
(2) Dental Clinic	Daily by appointment.	Was open during the periods of the year the children in the Whittington area were being inspected and treated.
(3) Ophthalmic Clinic	Tuesday & Saturday mornings by appointment.	

GENERAL INFORMATION.

The total accommodation of Elementary Schools in the Borough for the year 1937 was 12,400, and the number of children on the register at the end of December, 1937, was 9,503.

The following table shows the names of the Schools and the number of children on the register at the end of the year 1937.

Hipper Street Junior Mixed	270
Hipper Street Infants	137
St. Helen's Street Junior Mixed	209
St. Helen's Street Infants	124
Central Girls' Modern	307
Central Boys' Modern	216
Brampton Junior Mixed	428
Brampton Infants	226
Old Road Mixed Modern	342
Old Road Infant and Junior	503
Christ Church Infant and Junior	163
St. Mary's Catholic Senior	150
St. Mary's Catholic Junior	263
Eyre Street Infants	168
Hasland Junior Mixed	298
Derby Lane Girls' Modern	217
Derby Lane Infants	283
Derby Lane Junior Mixed	492
" Cavendish " Junior Girls	232
" Cavendish " Infants	138
Newbold C. of E. Infant and Junior	116
" Gilbert Heathcote " Junior Boys	268
New Whittington Mixed Modern	196
New Whittington Infant and Junior	331
" Mary Swanwick " Mixed Modern	240
" Mary Swanwick " Infant and Junior	281
Brushes Infant and Junior	220
" Peter Webster " Boys' Modern	283
" William Rhodes " Infants	154
" Violet Markham " Girls' Modern	292
Highfield Hall Infant and Junior	460
Whittington Moor Infants	186
" William Rhodes " Boys' Modern	380
Tapton House Selective Central	417
" William Rhodes " Junior Mixed	285
Hasland Hall Mixed Modern	228

TABLE I.

MEDICAL INSPECTIONS OF CHILDREN ATTENDING
PUBLIC ELEMENTARY SCHOOLS.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Inspections in the prescribed Groups.

Entrants	1187
Second Age Group	915
Third Age Group	967
Total	3069
Number of other Routine Inspections	—
Grand Total	3069

B.—OTHER INSPECTIONS.

Number of Special Inspections	1201
Number of Re-Inspections	3511
Total	4712

C.—CHILDREN FOUND TO REQUIRE TREATMENT.

Number of individual children found at Routine Medical Inspection to require treatment (excluding Defects of Nutrition, Uncleanliness and Dental Diseases).

Group.	For defective vision(excluding squint).	For all other conditions recorded in Table IIA.	Total
(1)	(2)	(3)	(4)
Entrants	—	89	89
Second Age Group	65	69	127
Third Age Group	52	57	106
Total (Prescribed Groups)	117	215	322
Other Routine Inspections	—	—	—
Grand Total	117	215	322

TABLE II.

A.—Return of Defects found by Medical Inspection in the Year ended 31st December, 1937.

Defect or Disease.		Routine Inspections		Special Inspections	
		No. of Defects.		No. of Defects.	
		Requiring Treatment	Requiring to be kept under observation, but <i>not</i> Requiring treatment.	Requiring Treatment	Requiring to be kept under observation, but <i>not</i> requiring treatment.
(1)		(2)	(3)	(4)	(5)
Skin	Ringworm—Scalp	—	—	8	—
	Ringworm—Body	—	—	4	—
	Scabies	2	—	17	—
	Impetigo	2	—	25	—
	Other Diseases (Non-Tuberculous)	12	—	75	—
	Total	16	—	129	—
Eye	Blepharitis	25	1	6	—
	Conjunctivitis	7	—	6	—
	Keratitis	—	—	1	—
	Corneal Opacities	—	—	1	—
	Other Conditions	18	2	23	1
	Total	50	3	37	1
Ear	Defective Vision	117	375	6	9
	Squint	16	12	1	—
	Defective Hearing	19	7	24	4
	Otitis Media	17	—	43	—
	Other Ear Diseases	12	—	26	—

TABLE II.—continued.

(1)		(2)	(3)	(4)	(5)
Nose & Throat	Chronic Tonsilitis only	20	86	14	10
	Adenoids only	1	3	5	1
	Chronic Tonsilitis and Adenoids	6	3	37	1
	Other Conditions	2	8	170	6
Enlarged Cervical Glands (Non-Tuberculous)		3	19	30	7
Defective Speech		—	8	1	1
Heart and Circulation.	Heart Disease :—				
	Organic	1	10	4	5
	Functional	3	69	3	6
Anaemia		16	1	27	—
Lungs	Bronchitis	7	5	20	—
	Other Non-Tuberculous Diseases	27	48	28	5
Tuberculosis	Pulmonary :—				
	Definite	—	—	—	—
	Suspected	—	—	—	—
	Non-Pulmonary :—				
	Glands	—	—	1	—
	Bones and Joints	1	—	—	—
	Skin	—	—	2	—
Other Forms		—	—	1	—
Total		1	—	4	—
Nervous System	Epilepsy	—	—	1	—
	Chorea.....	—	—	10	1
	Other Conditions	1	6	7	—
Deformities	Rickets	—	—	—	—
	Spinal Curvature	—	1	1	—
	Other Forms	10	11	10	5
Other Defects and Diseases		15	14	484	17
Total No. of Defects		360	689	1122	79

B.—CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED
DURING THE YEAR IN THE ROUTINE AGE GROUPS.

Age-Groups.	Number of Children Inspected.	A. (Excellent).		B. (Normal).		C. (Slightly Sub-normal)		D. (Bad)	
		No.	%	No.	%	No.	%	No.	%
Entrants ..	1187	23	1.9	1134	95.5	30	2.5	—	—
Second Age-Group ..	915	27	2.9	857	93.6	31	3.3	—	—
Third Age-Group ..	967	35	3.6	897	92.7	35	3.6	—	—
TOTAL ..	3069	85	2.7	2888	94.1	96	3.1	—	—

TABLE III.
Return of all Exceptional Children in the Area.
BLIND CHILDREN.

At Certified Schools for the Blind.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
2	—	—	—	2

PARTIALLY SIGHTED CHILDREN.

At Certified Schools for the Blind.	At Certified Schools for the Partially Sighted.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	—	1	—	—	1

DEAF CHILDREN.

At Certified Schools for the Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
4	—	—	—	4

PARTIALLY DEAF CHILDREN.

At Certified Schools for the Deaf.	At Certified Schools for the Partially Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	—	2	—	—	2

MENTALLY DEFECTIVE CHILDREN.
FEEBLE-MINDED CHILDREN.

At Certified Schools for Mentally Defective Children	At Public Elementary Schools.	At other Institutions	At no School or Institution.	Total.
1	99	2	—	102

EPILEPTIC CHILDREN.
CHILDREN SUFFERING FROM SEVERE EPILEPSY.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	—	—	2	2

TABLE III.—continued.
PHYSICALLY DEFECTIVE CHILDREN.
A. TUBERCULOUS CHILDREN.

1. CHILDREN SUFFERING FROM PULMONARY TUBERCULOSIS.
(including pleura and intra-thoracic glands).

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	3	—	—	3

2. CHILDREN SUFFERING FROM NON-PULMONARY TUBERCULOSIS.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
3	10	—	3	16

B. DELICATE CHILDREN.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	120	—	—	120

C. CRIPPLED CHILDREN.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
1	12	—	5	18

D. CHILDREN WITH HEART DISEASE.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	2	—	1	3

CHILDREN SUFFERING FROM MULTIPLE DEFECTS.

Combination of Defect.	At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
Mentally Defective & Heart Disease	—	—	—	1	1
Mentally Defective and Crippled . .	—	—	—	1	1

TABLE IV.

GROUP 1.—MINOR AILMENTS (excluding Uncleanliness, for which see Table VI).

Disease or Defect (1)	Number of defects treated or under treatment during the year.		
	Under the Authority's Scheme (2)	Otherwise (3)	Total (4)
<i>Skin—</i>			
Ringworm—Scalp	17	—	17
Ringworm—Body	15	—	15
Scabies	34	—	34
Impetigo	178	—	178
Other Skin Diseases	92	—	92
<i>Minor Eye Defects—</i>			
(External and other, but excluding cases falling in Group 2)	177	—	177
<i>Minor Ear Defects</i>	193	—	193
<i>Miscellaneous</i>			
(e.g. minor injuries, bruises, sores, chilblains, etc.) ..	2159	—	2159
TOTAL ..	2865	—	2865

GROUP 2.—DEFECTIVE VISION AND SQUINT (excluding Minor Eye Defects treated as Minor Ailments, Group 1).

	No. of Defects Dealt with.		
	Under the Authority's Scheme.	Otherwise.	Total.
Errors of Refraction (including squint)	861	24	885
Other Defect or disease of the eyes (excluding those recorded in Group I.)	75	9	84
Total	936	33	969

	Under the Authority's Scheme.	Otherwise.	Total.
No. of Children for whom spectacles were :—			
(a) Prescribed	329	20	349
(b) Obtained	294	20	314

GROUP 3.—TREATMENT OF DEFECTS OF NOSE AND THROAT.
NUMBER OF DEFECTS.

Received Operative Treatment.													
Under the Authority's Scheme in Clinic or Hospital. (1)				By Private Practitioner or Hospital apart from the Authority's Scheme. (2)				Total. (3)				Received other forms of Treatment. (4)	Total number treated. (5)
(1)	(2)	(3)	(4)	(1)	(2)	(3)	(4)	(1)	(2)	(3)	(4)		
—	1	15	—	2	4	29	—	2	5	44	—	—	51

(1) Tonsils only. (2) Adenoids only. (3) Tonsils and Adenoids. (4) Other Defects of the Nose and Throat.

GROUP 4.—ORTHOPAEDIC AND POSTURAL DEFECTS.

	Under the Authority's Scheme. (1)			Otherwise. (2)		Total number treated
	Residential treatment with education.	Residential treatment without education.	Non-residential treatment at an orthopaedic clinic.	Residential treatment with education.	Residential treatment without education. Non-residential treatment at an orthopaedic clinic.	
Number of Children treated ..	—	—	—	1	—	1

TABLE V.—DENTAL INSPECTION AND TREATMENT.

(1) Number of children inspected by the Dentist.

(a) Routine age-groups—

	Number.
Age 5	621
6	687
7	858
8	786
9	785
10	772
11	811
12	704
13	666
14	264
Total	6954

(b) Specials 199

(c) TOTAL (Routine and Specials) 7153

(2) Number found to require treatment 3397

(3) Number actually treated 2634

(4) Attendances made by children for treatment 2862

(5) Half-days devoted to :—

Inspection..... 34

Treatment 366

Total .. 400

(6) Fillings :—

Permanent Teeth 1592

Temporary Teeth 6

Total 1598

(7) Extractions :—

Permanent Teeth 907

Temporary Teeth 3043

Total . 3950

(8) Administrations of general anaesthetics for extractions —

(9) Other Operations :—

Permanent Teeth 279

Temporary Teeth 155

Total 434

TABLE VI.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

(1)	Average number of visits per school made during the year by the School Nurses	.....	.....	4
(2)	Total number of examinations of children in the Schools by School Nurses	.....	.....	34,115
(3)	Number of individual children found unclean.....	.....	.....	561
(4)	Number of individual children cleansed under Section 87 (2) and (3) of the Education Act, 1921	...	.....	—
(5)	Number of cases in which legal proceedings were taken :—			
	(a) Under the Education Act, 1921	...	.....	—
	(b) Under School Attendance Byelaws	...	.....	—

